

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	75331	
O.I.P.E. CLASSIFIER	<i>(50)</i>	<i>57</i>	<i>2-18-55</i>
FORMALITY REVIEW		<i>20611</i>	<i>2/23/58</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓ 5/20/50
2	✓ 5/23/51
3	✓ 5/11/51
4	✓ 5/12/51
5	✓ 5/12/51
6	✓ 5/12/51
7	✓ 5/12/51
8	✓ 5/12/51
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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